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CONFIRMATION NO. 9462

<b>SERIAL NUMBER</b> 10/801,085	<b>FILING OR 371(c) DATE</b> 03/15/2004 <b>RULE</b>	<b>CLASS</b> 548	<b>GROUP ART UNIT</b> 1626	<b>ATTORNEY DOCKET NO.</b> A1695-5P US
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 10/396,215 03/24/2003 PAT 6,706,878 which is a DIV of 10/093,939  
03/08/2002 PAT 6,703,502  
which is a DIV of 09/594,703 06/16/2000 PAT 6,369,224  
which is a DIV of 09/171,983 10/29/1998 PAT 6,110,914  
which is a 371 of PCT/SE98/01364 07/10/1998

*JLC*  
*6/9/07*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

SWEDEN 9702746-0 07/18/1997  
SWEDEN 9800977-2 03/24/1998

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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/31/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 19	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

22466

## TITLE

Spiroazabicyclic heterocyclic compounds

<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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